



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION  
ATTORNEY DOCKET NO. 43876-089

2731  
RECEIVED  
JUN 15 2000  
TECH CENTER 2700

In re Application of: Craig HANSEN et al.

Serial No.: 09/017,224

Group Art Unit: 2731

Filed: February 2, 1998

Examiner: B. Webster

For: DIGITAL DIFFERENTIAL ANALYZER DATA SYNCHRONIZER

AMENDMENT TRANSMITTAL

Honorable Assistant Commissioner  
for Patents  
Washington, D.C. 20231

Sir:

1.  Transmitted herewith is an amendment for the above-identified application.

**STATUS**

2.  Applicant is  small entity - verified statement:  
 attached  already filed.  
 other than a small entity.

**EXTENSION OF TIME**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. § 1.136 apply.

- (a)  Applicant petitions for an extension of time for the total number of months checked below:

EXTENSION (months)	FEE FOR SMALL ENTITY	FEE FOR OTHER THAN SMALL ENTITY
<input type="checkbox"/> one month	\$ 55.00	\$ 110.00
<input type="checkbox"/> two months	200.00	380.00
<input checked="" type="checkbox"/> three months	475.00	870.00
<input type="checkbox"/> four months	755.00	1,360.00

Fee \$ 870.00

If an additional extension of time is required, please consider this a petition therefor.

An extension for  months has already been secured and the fee paid therefor of  is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this Request \$       

- (b)  Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition for extension of time.

06/14/2000 SDUONG 00000163 500417 09017224

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870.00 CH



4.  The fee for claims has been calculated as shown below:

Claims Remaining After Amendment	Highest Number Previously Paid For	Present Extra	Rate	Additional FEE
Total Claims : 8	: 20	: 0	: x \$ 18.00 = :	28.00
Independent Claims : 1	: 3	: 0	: x \$ 78.00 = :	0.00
Multiple Dependent Claims (first presentation) : \$260.00 = :				0.00
Total = :				0.00
Reduction by ½ for small entity :				- 0.00
<b>TOTAL FEE</b> :				<b>0.00</b>

(a)  No additional fee for claims is required.

-OR-

(b)  The total additional fee for claims required \$\_\_\_\_\_.

#### FEE PAYMENT

5.  Attached is a check in the amount of \$\_\_\_\_\_.

Charge Deposit Account No. 500417 the amount of \$ 870.00. A duplicate copy of this Transmittal is enclosed for accounting purposes.

#### FEE DEFICIENCY

If any additional extension and/or fee is required, this is the request therefor and to charge Deposit Account No. 500417.

AND/OR

If any additional fee for claims is required, charge Deposit Account No. 500417. A duplicate copy of this Transmittal is enclosed for accounting purposes.

Respectfully submitted,

McDERMOTT, WILL & EMERY

By:

Michael E. Fogarty  
Registration No. 36,139

Date: June 13, 2000

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